

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AS		10/19/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	MM	780	11-17-00
RESPONSE FORMALITY REVIEW	A-M	JL 580	11-11-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here.

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